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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

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Practitioners associated with the Customer Number: OR Practitioner(s) named below (if more than ten patent pi	23418	n a customer number must be u	ised):
	Registration Number	Name	Registration Number
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s attorney(s) or agent(s) to represent the undersigned befor ny and all patent applications assigned <u>only</u> to the undersign tached to this form in accordance with 37 CFR 3.73(b). lease change the correspondence address for the application	ned according to the USPTO ass	ignment records or assignment	documents
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the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record The individual whose signapure and title is supplied below is authorized to act on behalf of the assignee			
Signature	Mass M/L	Date 03/28/2006	
Name	Michael Selzer	Telephone (630) 245 0600	
Title	Chief Executive Officer, Optobionics Corporation		

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